

Southside Families & Babies Meeting
Community Team
Meeting Notes, 3/18/2013

Core Team Present: Nancie Bechtel, CPH; Anne Trinh, CPH; Robyn Taylor, ODH; Alex Meyer, NCH; Sue Wolfe, Community Development for all People; Tiffani Scales, CPH

Community Team Members: There were 45 people present that represented organizations and residents of Columbus' South Side. The sign-in sheet is available upon request.

- I. Welcome & Introductions
 - a. Nancie called the meeting to order at 6:06 pm.
 - b. Introductions were made around the room by all meeting attendees.
- II. Update on Greater Columbus Infant Mortality Task Force (GCIMTF)
 - a. Alex Meyer gave an update on the GCIMTF which included an overview of the topics presented at large group meetings and an invitation for any SS members to attend the meetings. The next meeting is this upcoming Friday the 21st.
 - b. Q&A followed.
 - i. A community member was interested in the next topic so Alex answered that 'Healthy Pregnancy' is the topic for the next GCIMTF meeting.
- III. Where Are We Now and Where Do We Want to Go?
 - a. Sue Wolfe went over infant mortality basics and this group's progress to date.
 - b. Sue highlighted the importance of getting the message out about the meetings of this group as well as the purpose of the group to the South Side community.
 - c. Sue mentioned that it is crucial the group creates a plan and then implements the plan. She reminded the group of the two deliverables; one deliverable is upstream and the other is downstream. In other words, our two main goals should be proactive and reactive.
 - d. Sue briefly reviewed the PPOR model in relation to targeting maternal health. The community map highlighted infant mortality rates as a reminder to the group.
 - i. A community member asked if they could have extra copies of the map and was referred to the check-in table.
- IV. Group Problem Map
 - a. Anne Trinh drilled into the details of the problem map.
 - i. Anne reiterated to the group that the problems on this map were decided on by our group in the last community meeting. The map highlights all our ideas related to issues in maternal health on the South Side.
 - ii. Robyn Taylor also reviewed the map in relation to what we decided were important problems for mothers on the South Side.

- iii. Robyn explained specifics of each topic on the map and its relation to maternal health.
 - iv. Suggestions to add to the map included: Unemployment, mental health as a cause and precursor, stress as a result of economics, stress as a result of education, human trafficking, perception of self, acquiring a positive social network or role model, community awareness for boys/men of the topic, availability of dental services, lack of education around parenting skills, raising community standards and norms.
- b. A community member asked where the information on the slide was coming from and Anne answered that this data comes from birth certificates, which have a wealth of information.
- c. Anne and Nancie Bechtel explained population attributable risk for very preterm birth(s).
 - i. Community member asked about the statistic on teen births (-3.1). Anne stated that that number is medically related and there might be other factors behind the number that we cannot see. She reminded the group that many of the numbers are still related to the social determinants of health.
 - ii. Community members were confused over the numbers and percentages. Anne clarified the definition of common risk factors and how relatable the presented numbers are to infant mortality. She also repeated that this data is conceptual, meaning there are often other factors involved in a number. Anne informed the group that data should inform your decisions; don't let data make decisions for you.
- d. Anne presented the social determinants of health data. She mentioned that this is not perfect data but it still gives us an idea of the South Side in comparison to other local neighborhoods.
 - i. Denise Licon, an epidemiologist from CPH who created the current document, clarified what the topics on the screen meant (literacy rate, childhood poverty, etc.).
 - ii. Alex Meyer reminded the group to keep the downstream and upstream deliverables in their ideas as they looked at the screen.
 - iii. A community member suggested that in light of this data, our group should target the school system.

V. What is Happening in Ohio and Other Places?

- a. After a short stretching break, Tiffani explained the term "evidence based practices."
- b. Tiffani broke down the divisions among maternal health into preconception health, prenatal health, and perinatal health which is the most inclusive term.
- c. Tiffani mentioned that upstream goals are more difficult to gather data around (as they are long term) but it should not be a deterrent to us. This means we might not find other cities data around upstream goals.
 - i. As the other cities plans around infant mortality were presented, a community member asked for clarification on the duties of a doula. Tiffani answered their question and overall interest among the group around doulas ensued.
 - 1. Nancie said that getting Medicaid to pay for a doula for each mom would be an example of an upstream goal.
 - ii. A community member told the core team and larger group that 'assigned reading homework' is fine as they would like to learn more before coming to these meetings.
 - 1. Tiffani thanked the member for that suggestion and told the group to always read her e-letters as they have resource links to read beforehand.

- iii. Tiffani reminded the group that our goals should be sustainable methods that can continue on in our community.

VI. Guided Discussion: What's Possible in our Community

- a. Alex noted it was late in the meeting and so she quickly reiterated the point Tiffani had just made. Alex advised that our goals be sustainable as well as able to be evaluated. She suggested that group members reflect and think about this before our next meeting.
 - i. A community member asked if we were willing to do what it takes, go outside the box, and stay committed. Alex answered that this core team is very committed and ready to work with the south side on this. The community member responded that he has connections with many residents and is invested in this cause.

VII. Next Steps

- a. Tiffani will send all slides as a PDF file.
- b. Meeting minutes, PowerPoint presentations from today, and contact information will be available online at the initiative's website-
http://publichealth.columbus.gov/Ohio_Equity_Institute.aspx.
- c. The next meeting will engage Community Team members in a discussion around these ideas presented today.

VIII. Next Meeting

- a. The next meeting will be the third Tuesday in April on the 15th from 6-8 pm, at Barack Recreation Center.

IX. Adjournment

- a. The meeting was adjourned at 8:11 pm.

Minutes submitted by
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